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UNITED STATES CURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

CE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OM	B APPROVAL	1 6
OMB NUMBER:	3235-0076	1
Expires:	April 30, 2008	
Estimated average burd	η	
hours per response		1

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	SEC USE ONLY	Į.	
Prefix	Serial	•	_
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	DATE RECEIVED		_
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Name of Offering (check if this is an amendment and name has changed, and indicate change.)

Series	\sim	W		C	•

Filing Under (Check box(es) tha	t apply):
Type of Filing: ■ New Filing	□ Amend:

□ Rule 504

□ Rule 505

■ Rule 506 □ Section 4(6) □ ULOE



A. BASIC IDENTIFICATION DATA

1. Enter the information requested about the issuer

Name of Issuer (check if this is an amendment and name has changed, and indicate change.)

Address of Executive Offices (Number and Street, City, State, Zip Code)

□ Amendment

Telephone Number (Including Area Code)

781-202-3200

□ other (please specify):

1 Wayside Road, Burlington, MA 01803

Address of Principal Business Operations (if

(Number and Street, City, State, Zip Code)

Telephone Number (Including Area Code)

Brief Description of Business:

different from Executive Offices)

Provider of application software for data warehouse lifecycle management.

Type of Business Organization

corporation business trust ☐ limited partnership, already formed

limited partnership, to be formed

Actual or Estimated Date of Incorporation or Organization

Month Year 11

Estimated

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: DE CN for Canada; FN for other foreign jurisdiction)

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 USC 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

When to File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires a payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

		A. BASIC IDENT	IFICATION DATA			
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. 						
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	■ Executive Officer	■ Director	☐ General and/or Managing Partner	
Full Name (Last name first, if individual)	· · · · · · · · · · · · · · · · · · ·			-		
YV., Jan Sarran						
Hewitt, William Business or Residence Address	(Number and S	Street, City, State, Zip Co	de)			
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c/o Kalido, Inc., 1 Wayside Road, Burlin	ngton, MA 018					
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	■ Executive Officer	☐ Director	☐ General and/or Managing Partner	
Full Name (Last name first, if individual)					į.	
Nevins, Joan M.					d 1	
Business or Residence Address	(Number and	Street, City, State, Zip Co	de)			
c/o Kalido, Inc., 1 Wayside Road, Burli	ngton MA 019	103			t i	
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	■ Director	☐ General and/or Managing Partner	
Full Name (Last name first, if individual)	D 1 TOMOTO	Denoncial Owner	E Excellive Officer	- Director	Concia and managing raino	
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Barrows, Timothy	Olassah as assid 6	Stand City State 7in Co	4.5		·	
Business or Residence Address	(Number and S	Street, City, State, Zip Co	de)		:	
c/o Kalido, Inc., 1 Wayside Road, Burlis	ngton, MA 018	03			;	
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	□Executive Officer	■ Director	☐ General and/or Managing Partner	
Full Name (Last name first, if individual)						
Coelho, George					<u> </u>	
Business or Residence Address	(Number and S	Street, City, State, Zip Co	de)		м м	
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c/o Kalido, Inc., 1 Wayside Road, Burlin						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	■ Director	☐ General and/or Managing Partner	
Full Name (Last name first, if individual)					ļ	
Foy, James						
Business or Residence Address	(Number and	Street, City, State, Zip Co	rde)		!!	
c/o Kalido, Inc., 1 Wayside Road, Burlin	noton MA 618	.03			·	
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner	
Full Name (Last name first, if individual)					B. B. Hatte	
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Hayler, Andrew Business or Residence Address	(Number and	Street, City, State, Zip Co	da)			
Dustiness of Residence Address	(14umber and :	Street, City, State, Zip Ce	odc)		#	
14 Mayfield Avenue Chiswick London	W4 1PN Unite	d Kingdom				
Check Box(es) that Apply:	□ Promoter	☐Beneficial Owner	☐ Executive Officer	■ Director	☐ General and/or Managing Partner	
Full Name (Last name first, if individual)					\	
Spray, Christopher						
Business or Residence Address	(Number and	Street, City, State, Zip C	ode)			
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c/o Kalido, Inc., 1 Wayside Road, Burlin Check Box(es) that Apply:			- F	- D'		
Full Name (Last name first, if individual)	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner	
i di i vanic (Last nanc itist, ii ndividual)					•	
Atlas Venture Fund V, L.P.				<u> </u>	т 	
Business or Residence Address	(Number and	Street, City, State, Zip C	ode)			
890 Winter Street, Suite 320, Waltham,	MA 02451				·	
Check Box(es) that Apply:	□ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner	
Full Name (Last name first, if individual)				•	1	
Atlan Vantage E. ad M. J. D.					<u> </u>	
Atlas Venture Fund VI, L.P. Business or Residence Address	(Number and	Street, City, State, Zip C	ode)	<u> </u>		
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890 Winter Street, Suite 320, Waltham,	MA 02451					

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		A. BASIC IDENT	TFICATION DATA			
Enter the information requested for the Each promoter of the issuer, if Each beneficial owner having the Each executive officer and direct teach general and managing particles.	the issuer has be he power to vote ector of corporate	or dispose, or direct the issuers and of corporate	vote or disposition of, 10			he issu er,
Check Box(es) that Apply:	□ Promoter	■ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Man	aging Partner
Full Name (Last name first, if individual)		•				0 0
Danahmani Franci I I D		, ,				
Benchmark Europe I, L.P. Business or Residence Address	(Number and S	Street, City, State, Zip Co	de)			
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20 Balderton Street, London W1K 6TL, Check Box(es) that Apply:			- 2 - 0 - 0			
Full Name (Last name first, if individual)	□ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Man	iging Partner
run Name (Last name mst, ii muividuai)						
Matrix Partners VII, L.P.				·		
Business or Residence Address	(Number and S	Street, City, State, Zip Co	ode)			H
Bay Colony Corporate Center, 1000 Win	nter Street, Sui	te 4500, Waltham, MA	02451		_	
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	□ Director	. General and/or Man	aging Partner
Full Name (Last name first, if individual)		•				
Potter, Elizabeth S.	• •	•	••			i .
	(Number and S	treet, City, State, Zip Coo	de)			
11 Lorena Road, Winchester, MA 0189	, n .		, K	•		
Check Box(es) that Apply:	□ Promoter	■ Beneficial Owner	□Executive Officer	□ Director	☐ General and/or Man	aging Partner
Full Name (Last name first, if individual)	- I Tromoter	= Delicinetat Cwiter	DEACCHITE Officer	<u> </u>	El General and of Man	aging raither
Thorburn, Andrew J. Business or Residence Address	(Number and S	treet, City, State, Zip Coo	de)			•
	•	• • • • • • •				
7 Shanter Place, Alloway London KA7 4 Check Box(es) that Apply:		ngdom □ □ Beneficial Owner	D. Franctice Office	Di		ila Dada
Full Name (Last name first, if individual)	☐ Promoter	□ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Man	aging Partner
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Business or Residence Address	(No. 1) (1)					
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	(11thiller and t	Street, City, State, Zip Co	ode)		· 1	
	(Number and)	Street, City, State, Zip Co	de)		• •	
	□ Promoter		de) □ Executive Officer	□ Director	☐ General and/or Man	aging Partner
	<u> </u>		·	□ Director '	☐ General and/or Man	aging Partner
Check Box(es) that Apply: Full Name (Last name first, if individual)	<u> </u>		·	□ Director	☐ General and/or Man	aging Partner
Full Name (Last name first, if individual)	□ Promoter		□ Executive Officer	□ Dirœtor	☐ General and/or Man	aging Partner
Check Box(es) that Apply: Full Name (Last name first, if individual) Business or Residence Address	□ Promoter	☐ Beneficial Owner	□ Executive Officer	□ Director	☐ General and/or Man.	aging Partner
Full Name (Last name first, if individual)	Promoter (Number and S	☐ Beneficial Owner Street, City, State, Zip Co	□ Executive Officer	***	-	
Full Name (Last name first, if individual) Business or Residence Address	□ Promoter	☐ Beneficial Owner	□ Executive Officer	***	☐ General and/or Man	
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Full Name (Last name first, if individual) Business or Residence Address Check Box(es) that Apply:	(Number and S	☐ Beneficial Owner Street, City, State, Zip Co	□ Executive Officer de) □ Executive Officer	***	-	
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Full Name (Last name first, if individual) Business or Residence Address Check Box(es) that Apply: Full Name (Last name first, if individual) Business or Residence Address Check Box(es) that Apply:	(Number and S	☐ Beneficial Owner Street, City, State, Zip Co	□ Executive Officer de) □ Executive Officer	***	-	aging Partner
Full Name (Last name first, if individual) Business or Residence Address Check Box(es) that Apply: Full Name (Last name first, if individual) Business or Residence Address	(Number and S	☐ Beneficial Owner Street, City, State, Zip Co ☐ Beneficial Owner Street, City, State, Zip Co	□ Executive Officer de) □ Executive Officer ode) □ Executive Officer	□ Director	☐ General and/or Man	aging Partner
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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	- Carlos de Carlos de		
1.	exchange and already exchanged.	Aggregate Offering Price	Amount Already Sold
	Type of Security		
	Debt		S
	Equity	4,999,998.92	\$ 4 999 998 97
	• •	: :	<u>4.555,556.52</u>
	Common Preferred	n	
	Convertible Securities (including warrants)		<u> </u>
	Partnership Interests		s
	Other (Specify)		\$
		4,999,998.92	\$ 4,999,998.92
	Answer also in Appendix, Column 3, if filing under ULOE.		
			ę,
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number of Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	9	\$ 4,999,998.92
	Non-accredited Investors -		¢
	Total (for filings under Rule 504 only)	5	•
			\$
	Answer also in Appendix, Column 4, if filing under ULOE	· · · · · · · · · · · · · · · · · · ·	· · · · ·
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.	Type of Security	Dollar Amount
	Type of offering	occurry	Bold
	Rule 505		<u> </u>
	Regulation A	• • • • • • • • • • • • • • • • • • •	2
	Rule 504	e -	s
	Total	<u> </u>	s
			·
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees.		s
	Printing and Engraving Costs		S
	Legal Fees	•	\$ 40,000
	Accounting Fees	o ·	s
	Engineering Fees	0	\$
	Sales Commissions (specify finders' fees separately)		S
	Other Expenses (identify)	16 · * · · · · · · · · · · · · · · · · ·	
			•
	Total		\$_40,000